

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMG control number.

## **Application Number** 09/488,155 **CHANGE OF Filling Date** 1/20/2000 **CORRESPONDENCE ADDRESS First Named Inventor** Getsin, et al. **Application** Art Unit 2739 Address to: **Examiner Name** Unknown **Assistant Commissioner for Patents** 68621 Attorney Docket Number Washington, D.C. 20231

Please change the Correspondence Address for the above-identified application to:  X Customer Number 22242  Type Customer Number Here					22242			
X Firm or Individual Name	FITCH, EVEN, TABIN & FLANNERY							
Address	Suite 1600 - 120 South LaSaile Street							
Address								
City	Chicago	State	Chi	cago	ZIP	60603-3406		
Country	USA							
Telephone	805-781-2865	F	805-541 <b>-</b> 280		02			
This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).  I am the :  Applicant/Inventor.  Assignee of record of the entire Interest.  Statement under 37 CFR 3.73(b) Is enclosed. (Form PTO/SB/96).  X Attorney or Agent of record.  Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number  Typed or Printed								
Name Thomas F. Lebens								
Signature								
	April <b>21</b> , 2003		·					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								

X \*Total of 2 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box

•	
-	
	•
	l

PTO/SB/21 (08-00)

Linder the Paper Reduction Act of 1995 on	persons are required	U.S. Patent and 1 I to respond to a collection of in	Tradem	ved for use through 10/31/2002. CMB 0651-003 ark Office; U.S. DEPARTMENT OF COMMERCE on unless it displays a valid OMB control number			
TRANSMITTAL		Application Number		09/488,155			
FORM		Filing Date		Jan 20, 2000			
(to be used for all correspondence after initial filing)		First Named Inventor		Getsin, Evgeniy M.			
		Group Art Unit		2739			
		Examiner Name		Unknown			
Total Number of Pages in This Submission 2		Attorney Docket Number		68621			
ENCLOSURES (check all that apply)							
Fee Transmittal Form	Assigna	ment Papers Application)		After Allowance Communication to Group			
Fee Attached	Drawin	•		Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		ing-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final	er Final Petition			Proprietary Information			
Affidavits/declaration(s)	Provision	Petition to Convert to a Provisional Application		Status Letter			
Extension of Time Request	Power of Attorney, Revocation Change of Correspondence Address			Other Enclosure(s) (please identify below):			
Express Abandonment Request		al Disclaimer					
Information Disclosure Statement	Reque	st for Refund					
Certified Copy of Priority Document(s)	CD, NL	ımber of CD(s)					
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks		<u> </u>				
SIGNAT	URE OF APPL	CANT, ATTORNEY, O	R AG	ENT			
or L	IN & FLANNER	Y by Themas F. Leben	S				
Individual name Signature							
Date April <u>21</u> , 2003							
I hereby certify that this correspondence is being transplitted to the United States Patent and Trademark Office via 703-746-7239 on this date							
Type or printed name Thomas F. Le	bens ///	$ar{U}$					
Signature	1/54		Date	April <b>21</b> , 2003			
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount time your are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistal Confinitissioner for Patents, Washington, DC 20231.							